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LERNER, DAVID, LITTENBERG, KRUMHOLZ & MENTLIK 600 SOUTH AVENUE WEST WESTFIELD, NJ 07090

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(Depositor's name) (Date

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR ATTORNEY D	OCKET NO. CONFIRMATION NO.
09/602,951	06/23/2000	Belgacom Haba TESSERA-3.0	-113-CONT 1671

TITLE OF INVENTION: METHOD FOR FORMING A MULTI-LAYER CIRCUIT ASSEMBLY

APPLN, TYPE	SMALL ENTITY	issue fee	PUBLICATION FEB	TOTAL FEE(S) DUE	DATE DUE
penprovisional	NO	०८६,१३० ०६भर्द	S \$0	250 @132	O: 10/19/2004
EXAMINER		ART UNIT	CLASS-SUBCLASS	7	
Chang, Rick Kilta£		3729	029-852000	_	
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).      Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attacked.			<ol> <li>For printing on the patent front page, list</li> <li>the names of up to 3 registered patent attorneys or agents OR, alternatively.</li> <li>the name of a single firm (having as a member a registered attorney or agent) must the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.</li> </ol>		, DAVID, LITTENBEI LZ & MENTLIK, LLP
☐ "Fee Address" indication (or "Fee Address" Indication form F1O/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.					

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PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (B) RESIDENCE: (CITY and STATE OF COUNTRY)

(A) NAME OF ASSIGNEE

Tessers. Inc.

San Jose, California

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1400010, 2000	,			
Please check the appropriate assignee category or categories (	will not be printed on the patent);	O individual	Corporation or other private group entity	□ government
4a. The following fee(s) are enclosed:	4b. Payment of Fce(s):			
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Publication Fee (No small entity discount permitted)	☐ Payment by credit of	ard Form PTO-	-2038 is attached.	
Advance Order - # of Copies	_ The Director is he Deposit Account Num	reby authorized	by charge the required fee(s), or credit any	overpayment, to

5. Change in Entity Status (from status indicated above)

Q a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

D b. Applicant is not claiming SMALL ENTITY status. Sec, e.g., 37 CFR 1.27(g)(2).

01 FC:1501

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## **FACSIMILE TRANSMISSION**

ATTORNEY DOCKET NO.: TESSERA 3.0-113 CONT

**APPLICATION NO.: 09/602,951** 

**CONFIRMATION NO.: 1671** 

MAILING DATE OF NOTICE OF ALLOWANCE: July 19, 2004

FAX NUMBER: (703) 746-4000

PAGES INCLUDING COVER SHEET: 2

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October 14, 2004 Date

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